

APPLICATION FOR CONCESSIONS & EXHIBITS

(Please print legibly or type the front and back of this application form. We regret that incomplete or illegible application forms will not be considered.)

(Name of person who will run your operation at the ISF)	
NAME OF MANAGER: (Name of person who will run your operation at the ISF)	
(Name of person who will run your operation at the ISF)	
PERMANENT MAILING ADDDRESS:	
CITY / STATE / ZIP CODE:	
BUSINESS PHONE: () HOME: ()	
CELL PHONE: () FAX: ()	
E-MAIL ADDRESS:	
INDIANA RETAIL MERCHANT CERTIFICATE #(PROVIDE US A CO	
TYPE AND SIZE OF SPACE DESIRED:	OPY)
INSIDE SPACE 10' x 10' 20'x 10' 20' x 20'	
OUTSIDE SPACE HOW MANY SERVING SIDES?	
MINIMUM: FRONTAGEX DEPTH	
MAXIMUM: FRONTAGE X DEPTH	

(continued)

Trailer _____ Tent ____ Stand ____ Prep Area _____ **CONCESSION -**YES NO **ELECTRICAL NEEDS:** (IF YES, MUST COMPLETE AMPS, VOLTS INFORMATION.) 30 Amps ____ 60 Amps ___ 100 Amps ___ 200 Amps ___ Please note: All concessions/exhibits are required to supply all of their own electrical material (power cords/strips, etc.) Concessions/exhibits are responsible for any damage to underground utilities if hit by tent stakes, etc. Outside/concessions/exhibits may not connect or disconnect themselves. WATER AND SEWER NEEDS: (Check what is needed.) Running Water _____ Access to Water ____ Access to Sewer PRODUCT(s) / SERVICES YOU INTEND TO EXHIBIT OR SELL ITEMS SOLD/SERVICES OFFERED: List ALL items to be sold, exhibited and / or demonstrated. Gifts, novelties, and craft items must be SPECIFICALLY AND INDIVIDUALLY listed. "Crafts" or Novelty items" will not be acceptable. (If you are approved for space, your contract will state **ONLY** those items listed here and have been approved by Indiana State Fair which can be sold from your space. If space does not allow for a complete product/service listing and description, use additional sheets of paper) **REFERENCES:** Please provide complete information from two fair, hobby or trade shows, or similar events at which you have sold or demonstrated your product(s) and / or exhibited your service(s). FAIR/SHOW/EVENT #1 Name of Fair/Show/etc. Show Address Name of Contact Person Daytime Phone Number (_____) ____ FAIR/SHOW/EVENT #1 Name of Fair/Show/etc. Show Address Name of Contact Person Daytime Phone Number

(continued)

OUTSIDE - PLEASE INDICATE THE SIZE OF EACH THAT WILL BE USED WITHIN YOUR

LOCATION:

WE ANTICIPATE: (0	Check those which apply)							
Making cash sal	les Ta	Taking deposit with orders						
Order taking on	ly D	Display of product/service only						
Other (Please specify)								
Do you plan to hold a co	contest, registration, awa	ard a prize or	have a give	-away? (₋) Yes (_) No		
Do you plan to present	a demonstration?	() Yes	() No			
Do you plan to use a m If yes, the sound must b	icrophone/pitch? be kept low enough so it	(t does not int) Yes terfere with s	(surroundir) No ng booths.			
	OUSLY APPLIED FOI TE FAIR? () YES							
PHOTO/SCHEMATI	C OF EXHIBIT:							
	elear color photograph o your product(s) or servi		hematic draw	ving of yo	our exhibit /booth	and any		
with app	PLICATION FEE IS Not be a space will be offere	nd brochure						
of produ	rves the right to accept acts sold, or services off ars/shows/bank or busine	ered, appear	ance of your	space/boo				
	l and beverage concess of Health's Rules and I			the India	na State Depart	ment		
*****	* * * * * * * * * * * *	: * * * * * * :	* * * * * * *	* * * * *	* * * * * * * *	****		
AND TRUE, TO THE APPLICATION FOR	HE INFORMATION S BEST OF MY KNOW CONCESSION/EXHIE ME WITH THE INDIA	LEDGE, AN BIT SPACE	D UNDERS ONLY, NOT	STAND T	HAT THIS IS A	N		
(Sign other of a				_ DATE	Z:			
(Signature of owner as sta		PE EAID AT	TNI. CONICI	ZOOLONI (DEELCE			
Mail Application to:	INDIANA STAT	I E FAIR A'I	TN: CONCL	5221ON (JEFICE			

INDIANA STATE FAIR ATTN: CONCESSION OFFICE 1202 E 38TH STREET., INDIANAPOLIS, IN 46205